

Seattle HIV/AIDS Planning Council

Minutes ☿ January 14, 2008

4:00pm - 6:30pm

2100 Building – 2100 24th Avenue South, 98144

Committee Members Present: *Richard Aleshire, Amy Bauer, Kate Elling, Jim Elliott, Brandie Flood, Melinda Giovengo, Bill Hall, Sarah Kent, Kieu-Anh King, Gerrie LaQuey, Kris Nyrop, Arthur Padilla, Ron Padgett, Jodie Pezzi, Tony Radovich, David Richart, German Rodriguez, Pam Ryan, Erick Seelbach*

Committee Members Absent: *Heath Bouldin, Charlie Curvin, Shireesha Dhanireddy, Higinio Martinez, Eric Miles, Andrew Murphy, Kevin Patz, Bob Wood*

Planning Council Staff Present: Jesse Chipps, Natalia Ospina (minutes)

Health Department Staff Present: Karen Hartfield, Jeff Natter

Guests: Lina Ali, Efren Chacon, Philip Doles, David Fleming, Justin Hahn, Gary Johnson, Julie Loughran, Warren Leyh, Marcos Martinez, Michael Raitt, Lisa Schafer, Kadra Sheikh

Italics denote Planning Council Membership.

I. Welcome, Introductions and Announcements

Justin Hahn announced a HIV Partner Counseling and Referral Services training, which will take place March 17 – 19th. He distributed flyers.

II. Meeting Agenda

The group reviewed the revised agenda, which included the additions of a vote under the Membership Committee report and another one under Case Management Standards.

[Sarah Kent arrived at 4:07 p.m.]

☒ *The revised agenda was approved as written by acclamation.*

III. December Meeting Minutes

☒ *The December minutes were approved as written by acclamation.*

IV. Grantee Updates

PREVENTION:

Karen reported that the prevention planners are still in the process of getting the prevention contracts set up, noting that the new contracting system at the County is very slow and many contracts have not been signed yet. The first quarterly meeting with prevention providers will be next week. The MSM rebid award letters have been mailed out and the awards will be announced to the Council via email by the end of this week.

[Brandie arrived at 4:10 p.m.]

Karen noted that the planners have received \$300,000 from the City and County, and have put together a plan for that funding, which will include case finding and sex and drug harm reduction. More definite information on this plan will most likely be available at the February Planning Council meeting, as the proposal is currently being vetted through the City and County processes.

[Melinda arrived at 4:12 p.m.]

CARE:

☑ The group requested that Jeff Natter distribute his grantee update prior to Council meetings via email.

Jeff reported that he has not heard about the FY 2008 Part A formula or supplemental award yet.

Jeff noted that HRSA is mandating that all EMAs and TGAs move towards uniform client-level data by 2009. This would allow the identification of duplicate services used by one client, without violating HIPAA regulations. In addition, these data would include what services each client is using, and whether people being referred are following up on services. Jeff noted that Portland is already doing this. He added that it is difficult to have established programs change the software they use, and he hopes that the TGA will receive a translation program (from HRSA or elsewhere) allowing agencies to input their data using their current systems, and have it uploaded by the translation program. The worst case scenario would be if HRSA mandated a specific software program (such as CAREWare) adding to the administrative burden for agencies. Jeff reported that he has been working with Richard Aleshire and others to come up with ways of obtaining client-level data. Jeff will be attending the HRSA-sponsored February 1st client level data training meeting in Seattle. Mark Stenger from the State DOH will also be there. Jeff doubts that HRSA will grant additional funds to accomplish this task. Richard added that more than likely additional competitive SPINS grants would be applied for. The funding for this project would come from program administration (the 10% overhead which the Grantee agency receives) and not service dollars.

[Bill Hall arrived at 4:15 p.m.]

Jeff provided a presentation on the Severity of Need Index (handout attached to official record).

Jeff noted that the Council will need to do a 2008 increment/decrement plan.

V. Standards of Care for Case Management

Jesse noted that the standards for case management needed to be approved by the Council in order to be included in the 2008 contracts. Jeff added that they are a product of over two years of work by case managers across the state.

MOTION: Gerrie moved to adopt the Statewide Standards for Medical HIV Case Management as written. Jodie seconded. There was no discussion.

☑ The motion passed unanimously (18 in favor).

VI. Council Bylaw Updates

Jess provided a Bylaws 101 presentation (handout attached to official record). She instructed the Council to take the information home and review the changes in the Bylaws, and vote on the

proposed Bylaws at the February Council meeting. The proposed Bylaws will either be approved or rejected as a whole.

[Amy arrived at 4:45 p.m.]

Kris added that the current Bylaws are on the Planning Council web site, and that members should compare those with the proposed version. Jesse noted that the current bylaws are also in the New Member Orientation binders members received when they first joined the Council.

☛ **ACTION ITEM: Please review the current and proposed versions of the Bylaws, and provide feedback (including grammatical errors) to Jesse and/or the Co-Chairs as soon as possible.**

[Dr. Fleming and Gary Johnson arrived at 4:50 p.m.]

VII. Membership Committee

Gerrie distributed the revised Membership report (attached to the official record). Gerrie noted that there were two candidates to be voted on at the meeting: Marcos Martinez, a provider to Latino MSM 25 and older, and Lina Ali, a foreign-born Black unaligned consumer.

Lina introduced herself as having been on the Council before. She is from Tanzania and has been HIV positive since 1995. She has overcome two major surgeries since October, and is involved with a non-profit orphanage in Tanzania. She is also looking forward to returning to school full time. Lina expressed the need to bring her community's perspective and struggles to the table in order to get some of their issues addressed.

Marcos introduced himself as the new Executive Director of Entre Hermanos. He is new to Seattle and to the field of HIV/AIDS, however he is interested and enthusiastic to learn as much as he can and work hard to make a difference in the community. He serves primarily LGBT Latinos, many of whom are immigrants and monolingual Spanish speakers.

MOTION: Gerrie moved to elect Lina Ali to the Council. Erick seconded. There was no discussion.

☑ The motion passed unanimously

MOTION: Gerrie moved to elect Marcos Martinez to the Council. Jim seconded. There was no discussion.

☑ The motion passed unanimously

Jesse welcomed Marcos and Lina to the table, noting that they are unable to vote until Ron Sims officially appoints them.

Gerrie reported that the Membership Committee has a number of candidates for consideration: David Lee and Michael Raitt (who will both be up for a vote at the February Council meeting), and Philip Doles who has yet to attend a Council meeting, and will be considered for membership once he fulfills that requirement. Gerrie noted that Kadra Sheikh, present at tonight's meeting, is an applicant who would fill a foreign-born Black slot. Gerrie added that Madeline Brooks has resigned from the Council, and that Luis Viquez' term ended in December. She distributed Samuel Andrews' resignation letter and instructed members to approach the Membership Co-Chairs if they had any questions about his resignation.

Gerrie reported that Ron, Erick and German have all agreed to a second term, and that Jim cannot serve another term due to conflicts with school. She added that the Council is doing fairly well with recruitment and gaps, thus the Membership Committee will start focusing on retention rather than recruitment.

Members raised questions about Samuel's letter and his sudden resignation. Jesse noted that in response to an email she sent him asking him to clarify points in his letter, he wrote that he thought his email was clear, and that he felt there were problems with conflict of interest within the Health Department. This conflict of interest was something he felt the Council could not address and that he would rather use other venues to address it. He also said that this had been brought up previously and had been ignored (Jesse was not sure what he was referring to).

VIII. Meet Dr. David Fleming

Dr. Fleming initiated a discussion with the Council by stating that the purpose of tonight's meeting was to get a sense of who everyone is, answer questions that the Council had about him or the HIV/AIDS Program, and to obtain feedback from the group about what the Health Department could be doing better. Dr. Fleming provided a brief background on himself, his training and previous positions, noting his experience with the AIDS epidemic, international healthcare, prevention and public health.

Dr. Fleming noted he welcomed ideas for dealing with the issues of the aging population of PLWH, and in learning about the issues that affect street youth. In response to a question about what his thoughts were on the stable funding and epidemic for MSM, Dr. Fleming noted that while stable infection rates are a sign of victory for King County, the area could do better. He emphasized the need to promote testing, the importance of effective risk-reduction programs, and innovation in finding alternative mechanisms to reduce infection rates.

In response to a question regarding what Public Health could do to prevent HIV funding from declining, Dr. Fleming noted that the solution would be to advocate for a "bigger pie" instead of a "bigger slice of the pie". He argued that this would be done more effectively by obtaining more sources for public health that are flexible and can be allocated towards HIV, instead of advocating for HIV-specific funds from the state and local levels.

Dr. Fleming described his place in the organizational structure of King County and City of Seattle. He also noted what fell under his purview. He informed the group that his role, in order to be effective, was not to provide direct leadership, but rather "adaptive" leadership so that all individuals are involved in bringing resources together and agreement on how to move forward based on consensus.

In response to a comment on the dangers of setting prevention goals that may fail, Dr. Fleming responded that if goals are not set, the area will not receive funding since the field is moving into an environment conducive to goal-setting. He agreed that the CDC's goals for reducing the number of new HIV infections failed, and cited that one reason for that was that the CDC did not conduct business differently after setting its goals. He emphasized the need to be as innovative and effective with the available resources as possible.

In response to a question on how the public goes about pressuring Dr. Fleming to be more aggressive with harm reduction, and how the Council could support him in "ruffling feathers", Dr. Fleming noted that having strong, science-based evidence works best. He added that the evaluation component has to be effective, and that all should be in agreement that the proposed strategy is a good idea. He cautioned expressing values, noting that that is the community's role.

Dr. Fleming noted that the current major public health challenges are the three Ps: provision, protection and promotion of healthcare. He informed the group that the department is failing at these. There are an increasing number of people in the County without health insurance. Public Health clinics are running out of money because there is not sufficient funding from Medicaid to capture the costs related to treating the uninsured. The department needs to come up with a better and different way to provide access to healthcare. Secondly, the department needs to do more effective community injury and chronic disease prevention in order to prevent deaths. HIV also includes the three Ps, of which promotion seems to be the area where the department needs to be more effective.

In response to Dr. Fleming's question on what the department could be doing better and how it can work more effectively with the Council, Council members suggested:

- Looking into existing barriers that impede reduction in new infection rates (e.g., mental health issues, barriers to testing, etc.).
- Advocating for innovative programs that cross categorical boundaries (many different programs work on similar issues yet none of the systems are talking to each other or pooling funding).
- Seeing Public Health in a building capacity for underserved communities.
- Dr. Fleming being more of a presence at City Hall so that the City may give more priority to HIV/AIDS funding.

IX. Care Prioritization and Allocation

Jesse reported that Care Prioritization will take place on Mondays. The Steering Committee will be meeting on 1/17 to figure out remaining membership gaps and finalize the prioritization schedule. David added that prioritization will run from around the end of February to around the beginning of May, 2 – 6 pm, on the Mondays the Council does not meet. Jesse noted the possibility of having brief prioritization meetings before Council meetings in an attempt to shorten the length of the process.

Jesse announced that the Council needs to complete an increment/decrement plan for care funds coming in March. This meeting will most likely take place on 2/25. Pam noted that she would not be able to commit to another meeting in addition to prioritization. Jesse responded that the Steering Committee will discuss membership for the increment/decrement plan.

Kieu Anh requested that the proposed bylaws be presented in a format that would show a side-by-side comparison of the changes and the current bylaws.

🌟 ACTION ITEMS:

- ***Please contact Jesse if you are interested in participating in Prioritization.***
- ***Jesse will email the Council if the Steering Committee needs help filling prioritization membership gaps.***
- ***Jesse will prepare a reformatted version of the proposed bylaws to show a side-by-side comparison of the current bylaws and the proposed changes. This version will be included in the February Planning Council mailer.***

X. Other Business/Next Meeting

☛ **ACTION ITEM:** *Please email Jesse with any additional questions/comments for Dr. Fleming and she will forward them to him.*

Next Meeting: Monday, February 11, 2008, 4:00 – 6:00 p.m. at the **2100 Building, 2100 24th Ave. S., Seattle 98144**

The meeting was adjourned.